PTO/SB/06 (08-03)
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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875									Application or Docket Number B 9/760/6 9		
CLAIMS AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
FO	₹	NUME	NUMBER FILED		NUMBER EXTRA		RATE	FEE	1	RATE	ere.
BASIC FEE (37 CFR 1.16(a))							\$	1	IVIE	FEE
TOTAL CLAIM	S	12	مم سیان	- 1.		1		 	OR	<u> </u>	<u>\$</u>
(37 CFR 1.16(c)) INDEPENDENT CLAIMS		1/2	minus 20	-		1	X \$=	 	OR	X \$=	
(37 CFR 1.16(I			minus 3				X \$=	ļ	OR	x \$=	
MULTIPLE DEPENDENT CLAIM PRESENT - (37 CFR 1.16(d))							+\$=	<u> </u>	OR	+ \$	ļ
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL	L	OR	TOTAL	<u> </u>
CLAIMS AS AMENDED – PART II											
(Column 1) (Column 2) (Column 3)						SMALL	ENTITY	OR	OTHER THAN SMALL ENTITY		
Y X	05	CLAIMS REMAINING AFTER MENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
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Total (ST CFR 1.) Independ (ST CFR 1.)		3	Minus	"3	= 0		x \$=		OR	x \$ =	·
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							+s =		OR	+s =	
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
	(Column 1)		(Column 2)	(Column 3)						
M Z/9/19/19/19/19/19/19/19/19/19/19/19/19/1	S R	CLAIMS REMAINING AFTER MENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI: TIONAL FEE		RATE	ADDI- TIONAL . FEE
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Z Independe			Minus	<i>*V</i> \			x \$=		OR	X \$=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							+\$=		OR	+\$ =	
						_	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
	. (0	Column 1)		(Column 2)	(Column 3)		•				
S 9/8/65		CLAIMS EMAINING AFTER JENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
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Total (37 CFR 1.16 (37 CFR 1.16 (37 CFR 1.16		0	Minds (x \$=		OR	x \$=	
FIRST PRE	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					Γ	+\$ =		OR	+ \$ =	
							TOTAL ADD'L FEE		OR L	TOTAL ADD'L FEE	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN-THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											

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OR

OR

TOTAL

ADD'L FEE

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FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1,16(d))

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest Number Previously Paid For" IN-THIS SPACE is less than 3, enter "3".

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TOTAL

ADD'L FEE

If the entry in column 1 is less than the entry in column 2, write "0" in column 3.